

## NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION **BUSINESS PROFITS TAX PARTNERSHIP**

#### REPORT OF CHANGE FOR IRS ADJUSTMENT ONLY

FOR DRAUSE ONLY

TEP 1				ERAL EMPLOYER IDENTIFICATION NUMBER	
lease rint	NAME OF PARTNERSHIP, ESTATE OR TRUST			TIFICATION NUMBER	
or Type	NUMI	BER & STREET ADDRESS			
	ADDF	RESS (Continued)			
		OR TOWN, STATE AND ZIP CODE			
TEP 2 igure	1	INCOME AND DEDUCTIONS as originally filed or previously adjusted (a) Ordinary income (loss) from trade or business activities	1(0)		
Your Tax		(a) Ordinary income (loss) from trade or business activities	` '		
		(c) Net income (loss) from other rental activities	` '		
		(d) Portfolio income (loss)	` '		
		(e) Guaranteed payments to partners	` '		
		(f) Other income or (loss from partnership activities <b>Not Included</b> in Lines 1(a) - 1(e)			
		(g) Partnership deductions from Federal Form 1065, Schedule K	` '		
		(h) TOTAL [Combine Lines 1(a) - 1(g) As originally filed or previously adjusted	(0)		
	2	NET GAIN (LOSS) FROM SALE OF ASSETS As originally filed or previously adjusted	` '		
	3	INSTALLMENT GAIN (LOSS) As originally filed or previously adjusted			
	4	SEPARATE ENTITY ADJUSTMENT As originally filed or previously adjusted	4		
	5	GROSS BUSINESS PROFITS As originally filed or previously adjusted (Combine Lines 1(h), 2, 3 at			
	6	INTERNAL REVENUE SERVICE ADJUSTMENTS TO FEDERAL INCOME (From Page 2, Section 1, L	ine 1) 6		
	7	SUBTOTAL (Line 5 adjusted by Line 6). If a loss show in parenthesis	7		
	8	COMPENSATION DEDUCTION FOR PERSONAL SERVICES	8		
	9	GROSS BUSINESS PROFITS AS ADJUSTED BY IRS ADJUSTMENTS	9		
	10	ADDITIONS AND DEDUCTIONS  (a) As originally filed or previously adjusted	10(a)		
		(b) Adjustments to additions from Page 2, Section 2, Line 2			
		(c) Adjustments to deductions from Page 2, Section 3, Line 3			
		(d) Total adjusted additions and deductions [Combine Lines 10(a), 10(b) and 10(c)]	10(d)		
	11	ADJUSTED GROSS BUSINESS PROFITS [Line 9 adjusted by Line 10(d)] (If negative show in parer	nthesis) 11		
	12	NEW HAMPSHIRE APPORTIONMENT (From DP-80, Line 5. Express as a decimal to 6 place	es)		
		If this apportionment percentage is different from the percentage originally filed or previous adjusted, check here and attach a revised DP-80	ıy 12		
	13	NEW HAMPSHIRE TAXABLE BUSINESS PROFITS (Line 11 x Line 12)	13		
	14	NEW HAMPSHIRE BUSINESS PROFITS TAX AS ADJUSTED BY IRS ADJUSTMENTS (Line 13 x tax rate, see DP-87 instructions)	14		
TEP 3	15	Credits allowed under RSA 77-A:5 as originally filed or previously adjusted	15		
gure		Subtotal (Line 14 minus Line 15)			
our Credits	16 17	NH Business Enterprise Tax as originally filed or previously adjusted			
	18	Internal Revenue Service adjustments to Business Enterprise Tax (attach revised BET and/or BET			
	19	NH Business Enterprise Tax as adjusted by IRS adjustments (Line 17 adjusted by Line 18)			
	20	NH Business Enterprise Tax Credit to be applied against BPT (Enter the lesser of Line 16 or			
	21	NH Business Profits Tax Net of Statutory Credits as adjusted (Line 16 adjusted by Line 20			
	22	NH Business Profits Tax Net of Statutory Credits as originally filed or previously adjusted.	· -		
	23	Balance of tax due (Line 21 minus Line 22)			
	24	Interest due (see DP-87 instructions)			
	25	Balance due (Line 23 plus Line 24)			
	26	Refund due (Line 22 adjusted by Line 21)			
FOR DRA				and complete	
TORDIA	103L O	If prepared by a person other than the taxpayer, this declaration is based on all information			
		X			
		SIGNATURE (IN INK) OF TAXPAYER DATE SIGNATURE (IN INK) OF PREI	PARER OTHER THAN TAXI	PAYER DATE	
		TITLE PREPARER'S IDENTIFICATION	N NUMBER		
		NH DEPT OF REVENUE ADMINISTRATION MAIL AUDIT DIVISION PREPARER ADDRESS			
		TO: PO BOX 457			
		CONCORD, NH 03302-0457 93 CITY/TOWN, STATE AND ZIP C	CODE	DP-87 PART	

FORM DP-87 PART

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Page 2

		S ADJUSTMENTS TO INCOME							
	FEDERAL FORM	er of adjustments exceed the lines provided, attach a schedule and sumn  ADJUSTMENT DESCRIPTION	AMOUNT ORIGINALLY REPORTED	AMOUNT OF CHANGE	BALANCE AFTER CHANGE				
Α									
В									
С									
D									
Е		Total from attached schedule							
Li	ne 1 Enter	total of Lines A through E here and on Page 1, Line 6	1						
	SECTION 2 IRS ADJUSTMENTS TO ADDITIONS								
	If the numbe NH RETURN LINE NO.	er of adjustments exceed the lines provided, attach a schedule and summ  ADJUSTMENT DESCRIPTION	arize on Line E. AMOUNT ORIGINALLY REPORTED	AMOUNT OF CHANGE	BALANCE AFTER CHANGE				
Α									
В									
С									
D									
Е		Total from attached schedule							
Line	e 2 Enter t	otal of Lines A through E here and on Page 1, Line 10(b)	2						
		ADJUSTMENTS TO DEDUCTIONS							
	f the numbe NH RETURN	er of adjustments exceed the lines provided, attach a schedule and summer	arize on Line E.  AMOUNT ORIGINALLY	AMOUNT	BALANCE				
	LINE NO.	ADJUSTMENT DESCRIPTION	REPORTED	OF CHANGE	AFTER CHANGE				
Α									
В									
С									
D									
Е		Total from attached schedule							
Line	Line 3 Enter total of Lines A through E here and on Page 1, Line 10(c)								

#### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

## REPORT OF CHANGE (ROC) GENERAL INSTRUCTIONS

### IRS ADJUSTMENT ONLY

	REPORT OF CHANGE GENERAL INSTRUCTIONS FOR ALL YEARS				
WHO MUST FILE	New Hampshire Report of Change form(s) must be filed when Internal Revenue Service has notified you of a change they made to your federal return.				
WHEN TO FILE	Pursuant to RSA 77:24-b, RSA 77-E:9 and RSA 77-A:10, a Report of Change must be filed with the Department no later than 6 months from receipt of a final determination of adjustments from the Internal Revenue Service.				
WHAT YOU WILL NEED	To file a report of change you will need to obtain:  The IRS form reporting the change;  The appropriate New Hampshire Report of Change form(s) for each taxable period; and  A copy of your New Hampshire and federal return as originally filed.				
	A complete Report of Change form, with all applicable schedules and returns must be filed. Each Report of Change form must be complete including original signatures in ink. Incomplete Report of Change forms will not be accepted.				
WHERE TO FILE	Your completed Report of Change form(s) along with the IRS form reporting the change and a copy of any changed federal form or schedules must be mailed within 6 months to: Department of Revenue Administration, Audit Division, PO Box 457, Concord, NH 03302-0457.				
FILLING OUT THE FORM(S)	When completing the Report of Change form, you should use the changed numbers as reported to you in the final determination you received from the IRS. For purposes of reporting IRS changes to a husband and wife's separately owned business organizations, a separate Report of Change form is required for the husband and wife.				
CALCULAT- ING INTEREST	Interest is calculated on the balance of tax due from the original due date of the return to the date paid at the rate listed below. (Interest due = tax due x number of days x daily rate decimal equivalent).    PERIOD   RATE   DAILY RATE DECIMAL EQUIVALENT				
NEED FORMS	Forms may be obtained from our web site at <a href="https://www.revenue.nh.gov">www.revenue.nh.gov</a> or by calling our forms line at (603) 271-2192.				
NEED HELP	Should you need assistance filling out the forms you can call (603) 271-3400.				
	REPORT OF CHANGE FORMS FOR ALL TAX PERIODS				
BUSINESS TAX	To report a change, file a completed Form DP-87-CORP for a Corporation, DP-87-WE for a Combined filer, DP-87-PROP for a Proprietorsh DP-87-FID for a Fiduciary and DP-87-PART for a Partnership and all attachments for each year you are reporting a change.				
SMLLC TAX	A Single Member Limited Liability Company (SMLLC) is required to complete a Form DP-200, Request for Department Identification Number (DIN), <b>ONLY</b> if the SMLLC does <b>not</b> have a federal employer identification number; shares a taxpayer identification number with another taxpayer subject to taxation; or is not required to obtain a federal employer identification number, social security number or an individual taxpayer identification number issued by the Internal Revenue Service. This form must be filed 30 days prior to filing any other tax related documents.				
I & D TAX	To report a change to your Interest and Dividends Tax return file a separate Form DP-87-ID for each year you are reporting a change.				
BETRATES	EFFECTIVE DATE         RATE           7/1/93         .25           7/1/99         .50           7/1/01         .75				
BPT RATES	EFFECTIVE DATE         RATE           6/30/88         8%           7/1/93         7.5%           7/1/04         7%           For tax years prior to 6/30/88, please call the Department				

For tax years prior to 6/30/88, please call the Department

at (603) 271-2191 for the tax rates.

7%

8% 8.5%

7/1/94

7/1/99

7/1/01